BEST AVAILABLE COPY.

ı	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number ORD ORD						
_															
İ	CLAIMS AS FILED - PART I							SMALL ENTITY				/			
r	OTAL CLAIM	10 101	(Colun	<u>nn 1)</u>	(Column 2)			TYPE			OF	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS 17								RATE	Τ	FEE	7	RATE			
LF	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FEE		55.00	1,.	BASIC FE				
TOTAL CHARGEABLE CLAIMS			17 m	/ 7 minus 20=		d		X\$ 9=			OF		710.00		
ΙN	DEPENDENT	CLAIMS	12) 1	レ) minus 3 =		1			╅		-	` 	+		
М	ULTIPLE DEPI	ENDENT CLAIM	RESENT					X40=	+		OR	X80=	800		
* If the difference is colored to the								+135=	:		OR	+270=	ł		
•	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	_	-	OR	TOTAL	1790.		
CLAIMS AS AMENDED - PART II									_				R THAN		
_	(Column 1) (Column 2) (Column 2) (Column 2)							SMALI	L EN1	ΠΤΥ	OR		ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER BUSLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE		
	Total Independent	*	Minus	**		=		X\$ 9=		_ _ _	OR	X\$18=			
¥			Minus	***	·	=	Γ	X40=			OR	X80=	1		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╁╴		OH				
				and the second	·1		L	+135=		_	OR	+270=			
								TOTAL DDIT. FEE			OR	TOTAL ADDIT, FEE			
:	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										_				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	TIO	DI- NAL		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=			
	Independent	*	Minus	***		=	\vdash	X40=	\vdash				·		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		OR	X80=			
								+135 =			OR	+270=			
							AD	TOTAL DIT. FEE	<u> </u>		OR A	TOTAL DDIT. FEE			
	and an area of the con-	(Column 1) CLAIMS		(Columi		(Column 3)									
AMENDMENTC		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	F	RATE	ADI TION FE	iAL		RATE	ADDI- TIONAL		
<u>.</u>	Total	•	Minus	**		= .	一、	/e o			-		FEE		
	Independent	*	Minus	***		=	-	(\$ 9=		\dashv	OR	X\$18=			
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM			(40=			OR	X80=			
• If:	the entry in colum	nn 1 is less than the	entry in colum	on 2 write *0	" in colu	ernn 3	+	135=		c	DR	+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."															
TI	ne "Highest Num	ber Previously Paid	For (Total or	Independent	ss than) is the I	ು, enter "3." nighest number fo	ound i	n the app	ropriat			nn 1.			